

BEST PREPAID TUITION CONTRACT

Check the appropriate box ☐ New Application ☐ Rollover ☐ Transfer

Please print.

STEP 1 - PURCHASER INFORMATION

Name _____
(Mr/Mrs/Ms) (First Name) (Middle Name) (Last Name)

Address _____

City _____ State _____ Zip _____ County _____

Date of Birth _____ S.S.# _____

Home Phone _____ Work Phone _____

Fax # _____

PURCHASER APPOINTEE INFORMATION

This is the person who would act on the Purchaser's behalf in case of death or legal incompetency.

Name _____
(Mr/Mrs/Ms) (First Name) (Middle Name) (Last Name)

Address _____

City _____ State _____ Zip _____

S.S.# _____

Home Phone _____ Work Phone _____

Step 2 - Beneficiary Information

This is the person who will receive tuition benefits.

Name _____
(Mr/Mrs/Ms) (First Name) (Middle Name) (Last Name)

Address _____

City _____ State _____ Zip _____ County _____

Date of Birth _____ S.S.# _____

Home Phone _____

Relationship of Beneficiary to the Purchaser. (Check one.)

- ☐ Daughter ☐ Niece ☐ Granddaughter ☐ Brother ☐ Self
☐ Son ☐ Nephew ☐ Grandson ☐ Sister ☐ Other _____

BENEFICIARY APPOINTEE INFORMATION

This is the person who would act on the Beneficiary's behalf in case of death or legal incompetency.

Name _____
(Mr/Mrs/Ms) (First Name) (Middle Name) (Last Name)

Address _____

City _____ State _____ Zip _____

S.S.# _____

Home Phone _____ Work Phone _____

STEP 3 - PARENT, GUARDIAN OR TRUSTEE INFORMATION**Fill out only if Purchaser and/or Purchaser Appointee is a minor or trust.**

Name _____
(Mr/Mrs/Ms) (First Name) (Middle Name) (Last Name)

Address _____

City _____ State _____ Zip _____

Date of Birth _____ S.S.# _____

Home Phone _____ Work Phone _____

Legal Relationship to Beneficiary _____

STEP 4 - CONFIDENTIALITY, REFUNDS AND TRANSFER CONSENT

- ☐ Please check here if you do not want your records subject to public inspection. Failure to check this box may result in your personal information being released.

Refunds are limited to specific circumstances. Early withdrawal of funds is not permitted. (See Prepaid Tuition Contract Provisions Section 10)

Refund Recipient ☐ Purchaser ☐ Beneficiary

STEP 5 - SIGNATURE

I certify that I have read this Prepaid Tuition Contract, including the accompanying Contract Provisions and Instructions, and I understand them. I understand that this Contract is the entire agreement between the Baccalaureate Education System Trust and myself. I agree to be bound by the terms and conditions of this Prepaid Tuition Contract and the accompanying Contract Provisions. I further certify that the information I have provided on this Prepaid Tuition Contract is true and correct. If any of the above information changes, I agree to promptly notify BEST in writing of these changes.

Signature _____ Date _____

Printed Name _____

STEP 6 - OPTIONAL INFORMATION

This information will be used for reporting and marketing purposes.

Sex of Purchaser ☐ Male ☐ Female

Race of Purchaser ☐ Caucasian ☐ African American ☐ Hispanic
☐ Asian ☐ Native American ☐ Other _____

Sex of Beneficiary ☐ Male ☐ Female

Race of Beneficiary ☐ Caucasian ☐ African American ☐ Hispanic
☐ Asian ☐ Native American ☐ Other _____

Total household income of Purchaser
☐ Less than \$25,000 ☐ \$25,000 - 49,999 ☐ \$50,000 - 74,999 ☐ More than \$75,000

How did you learn about the BEST Program?
☐ Friend ☐ Newspaper ☐ Radio ☐ Employer ☐ Other _____
☐ Relative ☐ School ☐ TV ☐ Web Site



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